PART B - FEE(S) TRANSMITTAL

end this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

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	INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed wh appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" maintenance fee notifications. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) Note: A certificate of mailing can only be used for domestic mailings of Fee(s) Transmittal. This certificate cannot be used for any other accompany										
				•	paper	rs. Each additiona its own certificate	l paper, suc	ch as an assignme	nt or formal drawing, must		
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Λ5 //	San Jose, CA 95 01/2007 HVUONG2 00					M	ina Oliv	eri		(Depositor's name)	
						\mathcal{L}	nin O	li		(Signature)	
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	APPLICATION NO.	FILING DATE			FIRST NAMED INVENTO			ATTORNEY DOCKET NO.		CONFIRMATION NO.	
	09/995,377 11/26/2001			James Lewis van		elzen P000047/2			047/2298P	1812	
	TITLE OF INVENTION APPLN. TYPE	SMALL ENTITY	, · · · · ·	OR DVD SINGLE	PUBLICATION FEE		PREV. PAID ISSU	FFFE T	OTAL FEE(S) DUE	DATE DUE	
	nonprovisional	NO NO		\$1400	\$0	\$0			\$1400	04/25/2007	
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	EXAMINER		ART UNIT		CLASS-SUBCLASS		J				
	SHIBRU, HELEN 2621				386-082000						
٠	1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				(1) the names of to agents OR, alte (2) the name of a registered attorney 2 registered patent	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
	3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)										
	PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)										
	Nvidia Corporation				Santa Clara, CA						
	Please check the appropr	riate assignee category or	r catego	ories (will not be p	rinted on the patent) :		Individual XXC	orporation o	or other private gro	oup entity Government	
ē	4a. The following fee(s)	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-4160 enclose an extra copy of this form).									
	5. Change in Entity Status (from status indicated above) \[\begin{align*} \text{ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.} \] \[\begin{align*} \text{ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).} \]										
	NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.										
	Authorized Signature			Date	4/25	2007	· · · · · · · · · · · · · · · · · · ·				
	Typed or printed nam	ne Anthony C	. M	urabito			Registration N	No. <u>35</u>	295		
	This collection of inform an application. Confider submitting the complete this form and/or suggest Box 1450, Alexandria, V Alexandria, Virginia 22.	nation is required by 37 (attaility is governed by 35 and application form to the tions for reducing this buyinginia 22313-1450. DO 313-1450.	CFR 1.3 5 U.S.C e USPT orden, s O NOT	311. The informati 1. 122 and 37 CFR O. Time will var hould be sent to the SEND FEES OR	on is required to obtain 1.14. This collection by depending upon the Chief Information COMPLETED FORM	n or re is est indiv Office 1S TO	etain a benefit by timated to take 12 idual case. Any corr, U.S. Patent and D THIS ADDRES:	the public v minutes to omments or Trademark S. SEND T	which is to file (and complete, includir in the amount of the Coffice, U.S. Depart O: Commissioner	I by the USPTO to process) in gathering, preparing, and me you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450,	

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Docket No.: NVID-P000047

Thereby certify that this transmittal of the below described document is being deposited with the United States Postal Service in an envelope bearing First Class Postage and addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the below date of deposit.

Date of

4/25/2007 Deposit:

Name of Person Making the Deposit:

Mina Oliveri

Signature of the Person Making the Deposit:

Inventor(s):

Van Welzen, et al.

Serial No.:

09/995.377

Group Art Unit:

2621

Filed:

11/26/2001

Examiner:

Shibru, Helen

Confirmation No: 1812

Title:

METHOD AND SYSTEM FOR DVD SINGLE FRAME STEPPING BACKWARDS

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

ATTENTION: Mail Stop Issue Fee

Sir:

TRANSMITTAL OF PAYMENT OF ISSUE FEE (37 CFR 1.311)

- Applicant hereby pays the issue fee for the attached Issue Fee Transmittal PTOL-85
- 2. X Applicant is other than a small entity

Fee Calculation

(for other than a small entity)			
Application Status is:	Regular	Design	Total
Fee (CFR 1.18(a) and (b)):	X \$1,400.00	\$800.00	1,400.00
Additional Copies (10 @ \$3.00)			30.00
Total Fees			1,430.00

PAYMENT OF FEES

- 1. The full fee due in connection with this communication is provided as follows:
- [X]The Commissioner is hereby authorized to charge any additional fees associated with this communication or credit any overpayment to Deposit Account No.: 50-4160. A <u>duplicate copy</u> of this authorization is enclosed.
- [X] A check in the amount of \$1,430.00
- [] Charge any fees required or credit any overpayments associated with this filing to Deposit Account No.: 50-4160.

Please direct all correspondence concerning the above-identified application to the following address:

MURABITO, HAO & BARNES LLP

Two North Market Street, Third Floor San Jose, California 95113 (408) 938-9060

Respectfully submitted,

Date: 4/25/20

Ву:____

Anthony C. Murabito Reg. No.: 35,295